Vacancies of Librarians in Kendriya Vidyalaya

839. SHRI RAM AWADHESH SINGH: Will the Minister of HUMAN RESOURCE DEVELOPMENT be pleased to state:

(a) whether it is a fact that the posts of Librarians are lying vacant in many Kendriya Vidyalayas of the country;

(b) if so, what is the total number of such vacancies;

(c) what is the percentage of these vacancies in relation to total number of sanctioned posts of librarians and to the total number of Kendriya Vidyalayas eligible to have these posts; and

(d) what are the reasons therefor?

THE MINISTER OF STATE IN THE DEPARMENT OF EDUCATION AND CULTURE IN THE MINISTRY OF HUMAN RESOURCE DEVELOP MENT (SHRIMATI KRISHNA SAHI): (a) Yes, Sir.

(b) 77 as on 28-2-1986.

(c) 17 per cent.

(d) Vacancies occured due to crea tion of new posts and resignation] retirement/promotion of the existing librarians.

Purchase of Sera and Vaccines for Immunization Programme

840. SHRIMATI RAT AN KUMARI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what are the criteria on which Government decide the eradication or control of diseases for inclusion in the National Health Programme;

(b) what are the names of the diseases which were included in the said programme during 1986 along- with the steps taken for controlling **them;**

(c) whether it is a fact that a num ber of dangeroug diseases prevailing in the country have not been included in the National Health Programme;

(d) if so, the reasons therefor;

(e) whether Government have **set** up a committee to decide about the inclusion of diseases in the National Health Programme;

(f) if so, who are members of the committee and how many times this committee meets in a year; and

(g) names of other diseases being considered for inclusion in National Health Programme and by when same wjll be included?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) The broad criteria by which the Government decide the eradication or control of a disease to be included in the National Health Programmes are as follows:

(i) The magnitude of the incidence of the disease, the morbidity and mortality pattern and the effect of the disease on human resources development;

(ii) The inter-State spread of the disease;

(iii) The methodologies and techniques available for control of the disease;

(iv) The logistics of the measures for control of the disease and the availability of human and other resources to combat the disease; and

(v) The extent of expert advice, intervention and support required, for control of the disease.

(b) There are already National Programmes for control of diseases such as Malaria, T. B., Leprosy, Fila-ria, Goitre, Guinea Worm, Blindness etc. The National Programmes are

organised based on extensive studies, initiatives from the State Governments and detailed consultations and deliberations of experts. These programme are not taken up year after year. Usually, such programmes are designed at the time of the formulation of Five Year Plans excepting where urgency and immediacy requires inclusion of a programmes as a National Programme. No new programme has been introduced in 1986.

(c) and (d) As explained earlier, diseases are included in the National Health Programme based on various factors and not merely on the degree of danger. Dangerous disease may have purely local and freak outbreaks which may not justify their inclusion in the National Health Programme. Apart from this, the States may have their own programmes of control of diseases in their areas.

(e) to (g) Proposals for introduction of new Health Programmes are considered by steering Committees which are set up at the time of formulation of the Five Year Plan Programmes and also on the specific re-commendotioris of Experts Committee set up in specific cases when considered necessary.

Budget allocated for purchase ofDrugs under National HealthProgramme

841. SHRIMATI RATAN KUMARI; Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what was the total budget allocated for purchase drugs under National Health Programme for each year during the iast three years;

(b) what was the amount utilised each year for purchase of drugs;

(c) the names of medicines along with composition of each purchased for eradication and controlling of each disease mentioned under National Health Programme;

(d) whether it is a fact that number of medicines purchased were found to be of sub-standard quality;

(e) if so, what was the. number of samples tested each year and what was the findings of each;

(f) what is the system adopted for purchase of each medicine;

(g) whether it is a fact that medicines were purchased from units who do not even possess testing facilities; and

(h) if so, the names of units inspected before placing orders?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE); (a) to (c) Information is given in Annexure \. *See* Appendix CXLI, Annexure No. 33].

(d) No, Sir, The medicines are accepted by the Medical Stores Depot after getting satisfactory laboratory test reports. The samples which fail-ed in the test are not accepted.

• (e) The information is as under: —

Year	No. of samples sent for test	No. of samples Passed in test	No. of samples failed in test
1984-85	5580	5358	222
1985-86	7775	7740	35
1986-87	6808	6798	10
TOTAL :	20163	19896	267